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SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (94-24)//
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RMKS/1. THIS SERVICE IS FOR GENERAL DISTRIBUTION OF
INFORMATION AND NEWS OF INTEREST TO NAVY AND MARINE CORPS
MEMBERS, CIVILIAN EMPLOYEES, FAMILY MEMBERS AND RETIRED
BENEFICIARIES OF NAVY MEDICINE. MAXIMUM AND TIMELY
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2. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:

(940193)-Secretary Perry Speaks at TRICARE's Region 1 Ceremony
(940194)-Navy Providing Outstanding Medical Support in Zagreb
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(940196)-Quadruplets Born at NMC; Mother, Babies Doing Fine
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HEADLINE: Secretary Perry Speaks at TRICARE's Region 1 Ceremony
NNMCMC Bethesda, MD (NSMN) -- In a unique ceremony held at the
National Naval Medical Center Bethesda on 6 July, the chair of
TRICARE's Region 1 changed hands. The ceremony recognized the
change in the Lead Agent Executive Board's chairmanship from RADM
David M. Lichtman, MC, to MG Ronald R. Blanck, MC, USA,
commander, Walter Reed Army Medical Center. Secretary of Defense
William J. Perry was the keynote speaker; Assistant Secretary of
Defense for Health Affairs Stephen Joseph also spoke.

Region 1, one of the 12 health service regions created when
the Department of Defense restructured the Military Health
Services System in October 1993, is atypical. All other regions
have a lead agent centered around a single major medical center,
such as the two regions where the Navy is lead agent -- Naval
Medical Center Portsmouth, VA, for Region 2 and Naval Medical
Center San Diego for Region 9. Region 1's leadership is provided
by an Executive Board formed by the commanders of the Region's
three major medical centers -- National Naval Medical Center,
Walter Reed Army Medical Center, and Malcolm Grow Air Force
Medical Center -- and lead agent responsibilities, along with the
chair, rotate among the centers' commanders.

Before the ceremonial transfer of the chair from Navy to Army, Joseph spoke on the significance of TRICARE and the work being done in Region 1. TRICARE is DOD's response to changing military and health care priorities. It is a tri-service program representing a tremendous effort to ensure quality health care for over 8 million beneficiaries. Serving the dual mission of military medicine -- medical readiness and high quality, peacetime health care for eligible beneficiaries -- TRICARE is, in the words of Joseph, "what is right with American medicine." TRICARE Region 1, with over 1.2 million beneficiaries eligible for care, has the three major medical centers, 11 community hospitals, nine large freestanding clinics, and three PRIMUS outpatient clinics in its geographic area. Navy hospitals in the region include Patuxent River, MD, Groton, CT, and Newport, RI. The area covered by Region 1 extends from Fredericksburg, VA, north to Maine and west to the borders of New York and Pennsylvania.

Noting the "one team" approach of ongoing efforts by Region 1 in developing and implementing plans to closely affiliate and, in some cases, integrate certain functions to fully use valuable resources within the region, Joseph gave such examples as: Region 1's Primary Care Working Group designing an integrated tri-service primary care delivery system for the National Capital Area; a Medical Affairs Committee that is recommending integrating five Graduate Medical Education teaching programs; and recognizing the effectiveness of the program when Walter Reed Army Medical Center and Malcolm Grow Air Force Medical Center provided personnel to the National Naval Medical Center to backfill losses incurred when USNS Comfort (T-AH 20) deployed to the Caribbean.

Perry echoed the praise of Joseph for TRICARE, expressing his belief that it represents the sacred trust owed to the service members "... who put their lives on the line to serve our country." Perry sees TRICARE as an opportunity to improve military medicine and reduce costs by reforming the health care system. "By teaming up each region's military medical providers, TRICARE will give wider access to quality care to people in uniform, their families, our retirees and their family members." Noting the access to high quality care here in the National Capital Area at "three of the best medical centers in the country, military or civilian," Perry set as a goal "to provide this kind of access to quality care to all our people throughout the United States."

Outlining the critical role that military health care plays in America's security and military readiness, Perry closed by stating, "... our effectiveness demands that we provide the best health care coverage to our men and women in uniform, our retirees and their families. But, even more than that, it is a question of trust. The trust our forces and retirees deserve to have in their leadership, in the military services and in the Department of Defense."

Story by Eileen M. Mejia, TRICARE

Reprinted from The Journal, 7 July 1994

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HEADLINE: Navy Providing Outstanding Medical Support in Zagreb
CINCUSNAVEUR London (NSMN) -- Following is a 6 July 1994
"Personal For Gen Mundy, VADM Hagen and RADM Buffington" message
sent by ADM L.W. "Snuffy" Smith, Commander-in-Chief, U.S. Naval
Forces Europe:

"Commandant, Don and Jack: Spent afternoon of 4 July with
our medical folks and their supporting cast of USMC and SeaBees
in Zagreb. As they stood there accepting the UN Medal from GEN
Delapresle, I thought to myself that I'd never seen a sharper
formation. I'm also convinced that I've not witnessed a group
who better demonstrates a sense of pride and professional
competence in virtually every way from sharp salutes to dress
standards to the way they do their jobs. Outstanding hardly
captures this team's character.

"Don, you will recall my telling you of seeing a young
Russian lad who had had his left leg amputated above the knee.
When I saw him, just several days after the operation, he was in
our field hospital physical therapy. That was on 23 April. When
I saw the same lad on 4 July, I was astonished that he was
walking, without the use of a cane and with only a very slight
limp. In addition to his new leg, he was also wearing a USMC tee
shirt and smiled broadly with his SeaBee and Marine buddies when
I approached him. He is just one of the hundreds of success
stories of which all of your folks can be immensely proud.
Clearly this wonderful group has established the standard of
excellence for field hospitals and support thereto. Proud to be
an American when you witness what I saw is an understatement."

-USN-

HEADLINE: DOD Providing Care for Gulf War Veterans

NNS - BUMED Washington (NSMN) -- On 23 June, Dr. Stephen
Joseph, Assistant Secretary of Defense for Health Affairs,
announced the start of a new program to provide extensive medical
evaluations for Persian Gulf veterans who are ill.

The evaluation program is a three-phase process. Phase one
is a basic physical and screening examination. Phase two is an
individualized thorough medical examination. Phase three will
include more specialized examinations and tests.

The primary objective of the examinations is to identify an
individual diagnosis for each patient. "Our highest priority
continues to be that service women and men who are ill as a
result of service to their country in the Gulf War are treated
thoroughly, properly and humanely," said Joseph.

Sick Gulf War veterans are encouraged to come forward for
treatment. DOD has established a toll-free number,
1-800-797-9699, for service members and their families
experiencing health problems that may have been caused by service
in the Persian Gulf War. The information will be forwarded to
the staffs of DOD medical centers, who will ensure that patients
are contacted to schedule medical exams.

Reprinted from Navy News Service 039/94, 29 June 1994

-USN-

HEADLINE: Quadruplets Born at NMC; Mother, Babies Doing Fine
NMC San Diego (NSMN) -- Marine SSgt Helena De Los Santos, 29, and her husband, Santos, are the proud parents of quadruplets born at Naval Medical Center San Diego, the first quadruplets born here since 1983.

The De Los Santos quadruplets were born Sunday, 26 June, beginning at 0826. The babies, the result of in vitro fertilization, are healthy, active and stable in the medical center's neonatal intensive care unit where they are expected to remain for four to six weeks.

De Los Santos is stationed with the Landing Force Training Command, Naval Amphibious Base, Coronado, CA. Both she and her husband are from San Jose, CA. Their children, delivered by C-section, are:

- Santos Vidal, born 0826, 3 lbs, 7 oz.
- Candelario Francisco, born 0827, 3 lbs, 4 oz.
- Josephine Catalina, born 0828, 2 lbs, 7 oz.
- Teresa Rita, born 0828, 3 lbs, 1 oz.

-USN-

HEADLINE: Treating Snoring with Laser -- A First for NMC Oakland
NMC Oakland, CA (NSMN) -- When 18th century satirist Jonathan Swift wrote his famous quote, "Necessity is the mother of invention," he may not have had in mind the budget cutting and military downsizing that are commonplace in our contemporary society. Nevertheless, and this is definitely true of medicine, that thought is often behind some of the short-term procedures developed to treat and cure diseases quicker and less expensively than by long-established methods and practices.

One of these procedures -- laser treatment/cure of snoring -- was performed at Naval Medical Center Oakland for the first time in June by CAPT Clarence G. Strom, MC, of the Otolaryngology (Ear, Nose and Throat -- ENT) Department. Called LAUP (laser assisted uvula palatoplasty), the surgery accomplishes in about 15 minutes what used to require total anesthesia and inpatient hospitalization for two days.

"Essentially, this is a treatment for snoring on an outpatient basis," said Strom, who took a course last December and explained that the surgery entails shortening of the uvula with a laser (diagram available). He explained that he was interested in the procedure to help reduce the backlog of operations on the ENT waiting list. "With the laser, surgery takes only 15 minutes, with the patients treated right in the doctor's office -- sitting upright and fully awake in a comfortable chair without having to be admitted," he said. "After a local anesthetic is applied, the laser is used to trim and reshape the uvula, which has no real function. This creates a groove, causes the palate to fold up and stops the vibration which provokes the snoring."

Compared to life-threatening diseases such as cancer, snoring can seem pretty innocuous. But it has great impact on fleet morale because it is disruptive to the snorer and those around him or her, interrupting sleeping patterns and making restful sleep difficult. According to LCDR Timothy Tolan, MC,

USNR, this problem is critical aboard ship where sailors sleep in close quarters.

"This creates conflicts in shipmate bunks," explained Tolan, an ENT staff physician who also performs the LAUP surgery. "This new procedure significantly reduces those conflicts and improves the morale in tight quarters." He added that his department takes pride in the fact that, to the best of their knowledge, it is the first time the procedure was performed in the entire Navy Medical system.

Strom performed the first laser assisted uvula palatoplasty at Naval Medical Center Oakland on 9 June 1994. As of 30 June, Tolan said that the ENT staff had done 15 LAUPs, thus reducing their prior ENT waiting list of 25 by 60 percent in three weeks.

With these statistics in mind, it is easy to predict the benefits Strom's initiative will create once the procedure is broadcasted throughout Navy medicine. It will increase productivity of Navy surgeons and speed up disposal of case loads. It will enhance the quality of life aboard ship, improve marital relationships, thereby increasing productivity throughout the entire fleet ... the list is endless. In these days when health care reform and budget cutting are bywords, its effect on the future of military medicine is infinite; for the fleet, as Tolan so aptly put it, "The snoring outcast will be a thing of the past."

EDITORS NOTE: Photographs and diagrams are available upon request. Contact the author at (510) 633-5918, DSN 828-5918. Story by Andree Marechal-Workman

-USN-

HEADLINE: Clinic Named for Medal of Honor Recipient

MCB Camp Lejeune, NC (NSMN) -- In July 1968, during combat operations against enemy forces in the Republic of Vietnam, HM3 Wayne M. Caron, corpsman, Company K, 3d Battalion, 7th Marines, 1st Marine Division, sacrificed his life while administering first aid to his fellow comrades in arms.

Born 2 November 1946 in Middleboro, MA, Caron, the son of Aime Joseph and Lorraine Janet Caron, graduated from Memorial High School there in June 1966 and enlisted in the Navy at Boston on 12 July 1966.

After recruit training at Naval Training Center Great Lakes, IL, 16-months of Hospital Corps School, a tour at Naval Hospital Great Lakes and instruction at the Field Medical Service School, Marine Corps Base, Camp Pendleton, CA, Caron joined Company K in July 1968. He was killed in action on the 28th of that month.

For his conspicuous gallantry and intrepidity at the risk of his life above and beyond the call of duty in the Republic of Vietnam, Caron was awarded the highest military honor a person can possibly receive -- the Medal of Honor.

Twenty-six years later, Caron's sacrifice for his country was once again honored when the Medical/Dental Clinic in Courthouse Bay was dedicated in his name.

The renaming ceremony took place outside the clinic 17 June, which coincidentally was the 96th anniversary of the Hospital Corps under which Caron served.

Marines and Sailors from Marine Corps Engineer School, 2d Assault Amphibian Battalion and Courthouse Bay Area Medical/Dental Clinic, along with civilian, family members and guests, took part in the ceremony to honor one of our nation's fallen heroes.

During a 1953 presentation at Washington's Marine Corps Barracks, then Vice President Richard Nixon said of the Medal of Honor recipients, "Because of their sacrifices, the lamp of liberty burns more brightly in the world. Because they died, others will live. They have earned, many times over, the highest tribute our country can give to those who serve its colors: the Medal of Honor." The same can be said of Caron, who earned the Medal of Honor 15 years after those remarks.

At the ceremony, the narrator read Caron's Medal of Honor citation:

"While on a sweep through an open rice field in Quang Nam Province, Petty Officer Caron's unit started receiving small-arms fire. Upon seeing two Marine casualties fall, he immediately ran forward to render first aid, but found that they were dead.

"At this time, the platoon was taken under intense small-arms and automatic weapons fire, sustaining additional casualties. As he moved to the aid of his wounded comrades, Petty Officer Caron was hit in the arm by enemy fire.

"Although knocked to the ground, he regained his feet and continued to the injured Marines. He rendered medical assistance to the first Marine he reached, who was grievously wounded, and undoubtedly was instrumental in saving a man's life. Petty Officer Caron then ran toward the second wounded Marine, but was again hit by enemy fire, this time in the leg. Nonetheless, he crawled the remaining distance and provided medical aid for this severely wounded man.

"Petty Officer Caron continued to make his way to yet another injured comrade when he was again struck by enemy small-arms fire. Courageously, and with unbelievable determination, Petty Officer Caron continued his attempt to reach the third Marine until he was killed by an enemy rocket round.

"His inspiring valor, steadfast determination, and selfless dedication to duty in the face of extreme danger, sustain and enhance the finest traditions of the United States Naval Service. He gallantly gave his life in the service of his country."

Guest speaker RADM Dennis I. Wright, MC, said, "It is an honor and a privilege to participate today in this dedication ceremony honoring a hospital corpsman -- HM3 Wayne M. Caron. It was corpsmen such as he who developed that special bond with the Commandant's corps of Marines, and who by their valor and sacrifice established the legacy that Naval Medicine's Hospital Corps enjoys today.

"As we here today salute the courage and express our gratitude for the singular service and sacrifice of HM3 Wayne M. Caron, let us also recognize the service and sacrifice of all those who have served and those who are serving today in the Naval Hospital Corps. And say to them -- Thank you. Thank you and well done."

Then Wright, with the assistance of BGen Lawrence H.

Livingston, commanding general, Marine Corps Base, took part in the pulling down of a curtain to reveal the new name -- HM3 Wayne M. Caron Clinic.

The dedication ceremony closed with a 21-gun salute and the playing of "Taps" in remembrance of Caron. Afterward, everyone was invited inside the building for a cake-cutting ceremony and to view the two plaques for Caron's parents. Although they were scheduled to be at the renaming ceremony, Mrs. Caron's ill health prevented their attendance.

Story by Cpl Brian M. Danisevich, reprinted from the Marine Corps Base Camp Lejeune newspaper, Globe, of 30 June 1994.

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HEADLINE: Navy Medical Department People in Special Operations

BUMED Washington (NSMN) -- Wherever the Navy or Marine Corps goes, so does the Navy Medical Department. Thirty percent of our personnel are normally assigned with deployable fleet and fleet marine forces units. Additional medical support is provided for operations such as Provide Promise. Here is the latest update on where our medical people are on assignment.

Medical forces currently on operational assignment are:

Operation Sea Signal

Total medical/dental personnel: 466 (includes 398 BUMED augmentees)

USNS Comfort (T-AH 20): The hospital ship has one operating bed, 50 beds, and has a medical/dental staff of 398.

USNS Comfort has been tasked with providing echelon II medical care and migrant medical screening in accordance with Public Health Service guidance. CAPT Charles Blankenship, MC, from NNNMC Bethesda, commands the hospital ship's medical treatment facility. It is primarily staffed by facilities in the Healthcare Support Office (HSO) Norfolk region.

Operation Southern Watch

Total medical/dental personnel: 110 (includes six BUMED augmentees)

USS Carl Vinson (CVN 70) Carrier Battle Group (CVBG): The CVBG has 79 ward beds, one operating room, eight intensive care beds, four quiet room beds, and has a medical/dental staff of 56.

In Country: Attached with the Administrative Support Unit Bahrain are four physicians, two dentists, three nurses, one Medical Service Corps (MSC) officer and 26 corpsmen. BUMED also provides one corpsman to augment the COMUSNAVCENT staff, which is located adjacent to ASU Bahrain.

Operation Provide Promise

Total medical/dental personnel: 237 (includes 181 BUMED augmentees)

USS George Washington (CVN 73) Carrier Battle Group (CVBG): The CVBG has 60 ward beds, one operating room, eight intensive care beds, four quiet room beds, and has a medical/dental staff of 56.

LCDR Gail Regan, MSC, from MED 24, is located at Camp Pleso, Zagreb, Croatia, and is acting as the Force Hygiene Officer for the United Nations Protection Force located in country.

180 personnel assigned to Fleet Hospital 6 staff the U.N.

Hospital located at Camp Pleso. These personnel were taken from Navy Medical commands located throughout the HSO San Diego region.

Operation Joint Task Force Full Accounting

Navy physicians and independent duty corpsmen are supporting this operation by volunteering to serve tours ranging from just under two weeks to two months. Naval Hospital Newport, RI, and Naval Medical Center Portsmouth, VA, are each providing an IDC to augment missions currently in country. Seven of the nine missions to Southeast Asia identified for FY94 have been completed.

Exercise Support

Individuals and components of mobile medical augmentation readiness teams (MMARTs) support various exercises/operations as required, bolstering the "organic" medical assets of the units involved.

Surgical Team 4 (minus): six personnel -- one physician, one nurse and four corpsmen from National Naval Medical Center, Bethesda, MD, are providing MMART surgical team coverage for Exercise Valiant Usher.

Fleet Surgical Teams are also deployed to provide additional medical support where needed, as directed by the CINCs.

Miscellaneous OCONUS and Fleet Support

Providing TAD (temporary additional duty) support to 10 fleet platforms and nine OCONUS facilities are 55 Navy Medical Department personnel: 22 physicians, seven nurses, one MSC, and 25 hospital corpsmen.

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3. Changes of Command: Information on new assignments of Navy Medical Department leaders.

HEADLINE: Change of Command/Retirement at NNMC Bethesda

NNMC Bethesda, MD (NSMN) -- In a 1 July Change of Command/Retirement Ceremony, RADM David M. Lichtman, MC, turned over command of the National Naval Medical Center to RADM Richard I. Ridenour, MC. Lichtman retires after 32 years of naval service. Ridenour's previous duty was as the Deputy Surgeon General/Deputy Chief, Bureau of Medicine and Surgery. RADM Harold M. Koenig, MC, currently Deputy Assistant Secretary of Defense for Health Service Operations, will report as Deputy Surgeon General/Deputy Chief, BUMED later this month.

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HEADLINE: New CO at Research and Development Command

NMRDC Bethesda, MD (NSMN) -- In a 10 June ceremony, CAPT Thomas N. Jones, MSC, relieved CAPT Edward T. Flynn Jr., MC, as Commanding Officer, Naval Medical Research and Development Command.

Jones comes to NMRDC from one of its subordinate laboratories, the Naval Health Research Institute, which he commanded.

Flynn, one of the Navy's most knowledgeable experts in diving physiology, retired after 27 years service; he was awarded

the Legion of Merit during the ceremony.

Guest speaker ADM Elmo R. Zumwalt Jr. (Ret.), former Chief of Naval Operations and board member of the C.W. Bill Young Marrow Donor Recruitment and Research Program, praised NMRDC's pioneering efforts in bone marrow transplantation research and its support of the National Marrow Donor Program.

Story condensed from article by Doris Ryan, printed in NNMC Bethesda's The Journal, 16 June 1994

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HEADLINE: New Leadership at U.S. Naval Hospital Rota

NENS - USNH Rota, Spain (NSMN) -- On 7 June, CAPT Robert S. Kayler, MSC, relieved CAPT John R. Aguilar, MC, as the Commanding Officer of U.S. Naval Hospital Rota. Kayler's previous duty was as director for administration, Naval Medical Center San Diego. Aguilar is now assigned as Special Assistant to the Navy Inspector General for Medical Matters, Washington, DC. Information from NavEurNews Service 94-24, 23 June 1994

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4. Professional Notes: Information on upcoming symposiums, conferences or courses of interest to Navy Medical Department personnel and wrap-ups on ones attended. Anyone with information to share in this section should contact the editor (see the last paragraph of this message on ways to do so).

Scheduled Meetings:

-- 9-16 July 1994, The Third National Kaiser Permanente Internal Medicine Conference, Ritz Carlton Hotel, Kapalua, Maui, HI. For information, contact Eric Tepper, MD, Internal Medicine, The Permanente Medical Group, 3400 Delta Fair Blvd., Antioch, CA 94509; (510) 779-5211.

-- 11-22 July 1994, Operational and Preventive Medicine Course, NEPMU-5, San Diego. Call (619) 556-7086, DSN 526-7086 for information.

-- 20-24 July 1994, 22nd National Naval Officers Association (NNOA) Conference, San Diego. Call 1-800-772-6662 for information; Navy POC is CDR Ronald Keys at (703) 697-8554, DSN 227-8554.

-- 25-29 July 1994, Eighth Annual Sports Medicine Conference, San Diego. For information, contact the University of California, Office of Continuing Medical Education, (619) 534-3940.

-- 25-28 July 1994, Senior Enlisted Conference, Hyatt Regency Crystal City in Arlington, VA. For information, contact DTCS(AW/SCW) Frank Passion at (202) 653-1148, DSN 294-1148 or e-mail nmc0ftp@bumed40.med.navy.mil.

-- 1-12 August 1994, Operational Entomology Training, Navy Disease Vector Ecology and Control Center, Jacksonville, FL. For information, contact the DVECC Training Department at (904) 772-2424, DSN 942-2424, FAX (904) 779-0107.

-- 10-12 August 1994, World War II in the Pacific, Hyatt Regency Crystal City, Arlington, VA. Sessions include two on medicine (Combat Medical Support and Amphibious Warfare Medical Support), and one of the featured speakers will be an Army nurse

(Ruby Bradley). For information, call (703) 836-6727.

-- 21-22 September 1994, Fourth Annual Symposium on Health Care Ethics, Naval Air Station Glenview, IL. Sponsored by NavHosp Great Lakes, Bioethics Committee. For information call CDR F.E. Rodriguez, NC, Bioethics Committee Chair, at (708) 688-5929, DSN 792-5929.

-- 17-28 October 1994, Operational Entomology Training, Navy Disease Vector Ecology and Control Center, Jacksonville, FL. For information, contact the DVECC Training Department at (904) 772-2424, DSN 942-2424, FAX (904) 779-0107.

-- 13-18 November 1994, Association of Military Surgeons of the United States' Annual Meeting, "Unity Through Diversity," Orlando, FL, (301) 897-8800.

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5. Month of July observances and events occurring 13-25 July:
JULY

Hemochromatosis Screening Awareness Month (518/489-0972)
Safety Awareness Month

14 July 1789: Bastille stormed

16 July 1769: First California mission to the Indians --
Mission San Diego de Alcala -- founded

18 July: Material Professional Board Convenes

19 July: VOTE! Georgia Primary

19-25 July: Lead Poison Control Week (201/926-7575)

20 July 1969: Neil Armstrong first man to walk on moon

23 July 1829: William Burt patented typewriter

25 July 1944: Allies break out of Normandy beachhead

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6. ADDRESSEES ARE ENCOURAGED TO SUBMIT INFORMATION AND NEWS ITEMS OF MEDICAL DEPARTMENT OR BENEFICIARY INTEREST (IN STORY FORMAT) BY TELEPHONE, FAX OR E-MAIL TO BUMED, ATTN: EDITOR, NAVAL SERVICE MEDICAL NEWS (MED 00P2). TELEPHONE (202) 653-0793; DSN 294-0793. FAX (202) 653-0086; DSN 294-0086. E-MAIL NMCOENL@BUMED10.MED.NAVY.MIL//

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